

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SD	753/6	9/6/80
O.I.P.E. CLASSIFIER		45	9/12
FORMALITY REVIEW	HA	858	10-19-80
RESPONSE FORMALITY REVIEW	I		

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	12/2/80 11/1/80
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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